

# COUNTY OF SUFFOLK



## DEPARTMENT OF CIVIL SERVICE FOR APPOINTING AUTHORITY USE ONLY RESIDENT ELIGIBILITY VERIFICATION

A. Name: \_\_\_\_\_ Birth Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

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B. DOCUMENTS PROVIDED TO ESTABLISH RESIDENCY  
**FOR ELIGIBLE LIST:** \_\_\_\_\_ **CERTIFICATION OF ELIGIBLES #** \_\_\_\_\_

FOR LAW ENFORCEMENT POSITIONS, **MUST** include Driver's License and Voter's Registration Card. FOR ALL OTHER POSITIONS, Drivers License and a minimum of two other documents. **Attach copies of proof to this form and return with Certification of Eligibles.**

Check all others that apply

\_\_\_\_ Voter's Registration Card

\_\_\_\_ Property Tax Statement Date: \_\_\_\_\_

\_\_\_\_ Rent Receipts Date: \_\_\_\_\_

\_\_\_\_ Income Taxes Year: \_\_\_\_\_

\_\_\_\_ Utility Bill

\_\_\_\_ Electric

\_\_\_\_ Telephone

\_\_\_\_ Water

\_\_\_\_ Cable TV

\_\_\_\_ Oil/Gas

\_\_\_\_ Other (Specify): \_\_\_\_\_

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C. I attest that I reside at \_\_\_\_\_  
(No. Street Apt No.)

in the Incorporated Village/Town of \_\_\_\_\_, County of \_\_\_\_\_,  
State of New York and have resided at such address since \_\_\_\_\_. The documents that I have  
provided to verify my residency are genuine and related to me. I am aware that false statements made herein are  
cause of removal, under Civil Service Law, from consideration for, or subsequent loss of, a Civil Service  
position. I further understand that false statements made herein are punishable as a class "A" misdemeanor  
pursuant to Section 210.45 of the Penal Law, State of New York.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date